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| REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS | Application Number | 10/669,232 |
| | Filing Date | September 22, 2003 |
| | First Named Inventor | Joseph Ernest Lorkovic |
| | Art Unit | 2623 |
| | Examiner Name | Omar S. Parra |
| Attorney Docket Number | | |

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

36412

☒ Please change the correspondence address for the above-identified application to:

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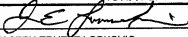
| | | | |
|---|--|-------|---------------------|
| <input checked="" type="checkbox"/> Firm or Individual Name | Bernard L. Kleinka, Esq., DUCKOR SPRADLING METZGER & WYNNE, A Law Corporation | | |
| Address | 3043 4th Avenue | | |
| City | San Diego | State | CA |
| Country | U.S.A. | | |
| Telephone | 619.209.3083 | Email | kleinka@csmwlaw.com |
| Zip | 92103 | | |

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

| | | | |
|-----------|--|-----------|---------------------------|
| Signature |  | | |
| Name | JOSEPH ERNEST LORKOVIC | | |
| Date | 10/5/07 | Telephone | 760-634-2426 760-687-1060 |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

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